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PTO/SB/01 (297)EM

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	Attorney Docket Nun	nber COTE/971/45		
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	(ofe, A.		
PATENT APPLICATION	COMPLETE IF KNOWN			
(37 CFR 1.63)	Application Number	09 1140 049		
☐ Declaration ☐ Declaration Submitted OR Submitted after initial with initial Filing (surcharge Filing (37 CFR 1.16 (e)) required)	Filing Date	8/26/98		
	Group Art Unit	363,-		
	Examiner Name	Glessner B.		
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As a brown mined invertor, I hereby decided that:							
My residence, post office address, and olitzenehlp are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Breakenry Utility Pole							
the specification of which (Title of the Invention)							
is attached hereto							
OR    Was filed on (MM/DDYYYY)   /9.6/2 / /6.0   es I leited States Application Number or PCT international							
was filed on (MM/DDYYYY) UF/26/99 as United States Application Number or PCT International							
Application Number 09/140,049 and was amended on (AM/DDYYYY) 09/28/200 (f applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
1 acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Co	py Attached? NO		
			0000	0000	0000		
Additional foreign application numbers are listed on a supplemental priority data sheel PTO/SB/028 attached hereto:							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
60(056, 43)	Os-(25/q7		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.				
	1	}					

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## MANUAL OF PATENT EXAMINING PROCEDURE

MAR 0 5 200 **PADEMAR** PTO/SB/01 (12-97)

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## - Utility or Design Patent Application DECLARATION -I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filing date of this application. **Parent Patent Number Parent Filing Date** U.S. Parent Application or PCT Parent (MM/DD/YYYY) (if applicable) Number Additional U.S. or PCT international application numbers are fisted on a supplemental priority.data.sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Paten and Trademark Office connected therewith: Customer Number Place Customer Number Bar Code Registered practitioner(s) name/registration number listed below Label hera Registration Registration Number Number Brian M. Dingman 32729 Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. or Bar Code Label Name Address Address MA Worces tex State ZIP City 508 791-8502 508 791-8500 US Telephone Fax Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle [if any]) Family Name or Surname Inventor's 9-02-0 Date Signature Citizenship Residence: City Country Post Office Address **Post Office Address** Country State supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto Additional inventors are being named on the

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